

# ICESA UPLOAD FILING REQUIREMENTS

for

Massachusetts Wage Reporting System

Commonwealth of Massachusetts Department of Revenue

### **TECHNICAL REQUIREMENTS**

### **Record Length**

Each record in a file <u>Must</u> be 275 characters in length. Data must be entered in each, recording the exact positions shown in the record layout.

### **Delimiters**

Record delimiters <u>Must</u> be used. They must follow the last character of each record. The delimiter must consist of two characters and those two characters must be carriage return and line feed.

**Do Not** place a record delimiter before the first record of the file. The ASCII-1 hexadecimal value for the carriage return character is 0D (zero and letter D); the ASCII-1 hexadecimal value for the line feed is 0A (zero and letter A). The ASCII-1 decimal values for the two characters are 13 and 10, respectively. A record delimiter must appear immediately after the last character of each record. The carriage return character and the line feed character will be placed in position 276 and 277, respectively.

**Do Not** place more than one delimiter i.e., more than one carriage return / line feed combination, following a record.

**Do Not** place record delimiter after a field within a record.

#### DATA RECORD DESCRIPTIONS

#### **Transmitter Record: Code A**

The code **A** record identifies the organization submitting the file. The code **A** record **must** be the first data record.

### **Employer Record: Code E**

The code **E** record identifies an employer whose employee wage and tax information is being reported. Generate a new **E** record each time it is necessary to change the information in any field on this record.

### **Employee Record: Code S**

The code S record is used to report wage and tax data for an employee. A code S record should follow its related code E record or it could follow an associated code S record that in turn follows a related code E record.

**Do Not** generate a code **S** record if only blanks would be entered after the record identifier.

#### **Names & Formats:**

The employee's name reported must agree with the spelling of the name on the individual's social security card. Parts of a compound surname must be connected by a hyphen. Single letter prefixes (e.g., "O", "D") **must not** be separated from the rest of the surname by a blank, but should be connected by an apostrophe.

Lower case letters are **Not** acceptable. **Do Not** include any titles in the name.

#### **Dollar Amounts:**

is not applicable, enter zero.

All monetary fields are strictly numeric. They must include dollars and cents with the decimal point assumed. Do not use any punctuation in any of these fields.

Negative (credit) dollar amounts are **Not** allowed. Right justify and zero fill all monetary fields. If a monetary field

#### **Total Record: Code T**

The code **T** record contains totals for all code **S** records reported since the last Code **E** record. A code **T** record must be generated for each code **E** record. (See previous record for description about reporting dollar amounts.)

### Final Record: Code F

The Code **F** record indicates the end of the file and **must** be the last record. (See previous record for the description about the reporting money amounts.)

## **SPECIFICATIONS & RECORD LAYOUTS**

Note: This format generally reflects ICESA record specifications. However, changes have been made to comply with Department of Revenue data requirements. These changes are highlighted below in bold print. Also, the ICESA record B (Authorization) is not used for this program.

**Record Name: A (Transmitter)** 

Location	Field	Lengt	h Description and Remarks
1	Record Identifier	1	Enter "A"
2-5	Year	4	Year in which wages are reported (e.g. 1997=1997)
6-14	Transmitter's Employer Identification Number	er	9 Nine digit numeric, omit hyphens, prefixes, suffixes
15-18	Tax Type Code	4	Enter "UTAX"
19-23	Reserved	5	No entry required
24-73	Transmitter's Name	50	Left justified
74-113	Transmitter's Street Address	40	Left justified
114-138	Transmitter's City	25	Left justified
139-140	Transmitter's State	2	Use Standard FIPS postal abbreviations
141-153	Reserved	13	No entry required
154-158	Transmitter's Zip Code	5	Enter 5 digit zip code
159-163	Transmitter's Zip Code	5	Enter hyphen in position 159, then 4 digit extension
164-193	<b>Transmitter's Contact Person</b>	30	Name and Title
194-203	<b>Transmitter's Contact Phone</b>	10	Business hours phone number
204-207	<b>Transmitter's Contact Phone Extension</b>	4	<b>Business hours phone number extension</b>
208-275	Reserved	68	No entry required
Total Rec	ord Length	275	

**Record Name: E (Employer)** 

Location	Field	Length Description and Remarks		
1-1	Record Identifier	1	Enter "E"	
2-5	Payment Year	4	Year in which wages are reported (e.g. 1997=1997)	
6-14	<b>Employer Identification Number</b>	9	Nine digit numeric, omit hyphens, prefixes, suffixes	
15-16	Massachusetts Filing Entity Code	2	Enter if applicable	
17-17	Amended	1	Enter "N" for original filing, or "Y" if amended filing	
18-23	Reserved	6	No entry required	
24-73	Employer Name	50	Left justified	
74-113	<b>Employer Street Address</b>	40	Left justified	
114-138	<b>Employer City</b>	25	Left justified	
139-140	<b>Employer State</b>	2	Use Standard FIPS postal abbreviations	
141-148	Reserved	8	No entry required	
149-153	Zip Code Extension	5	Enter hyphen in position 149, then 4 digit extension	
154-158	Zip Code	5	Enter 5 digit zip code	
159-166	Reserved	8	No entry required	
167-170	Tax Type Code	4	Enter "UTAX"	
171-172	State Identifier Code	2	Enter "25" (e.g. 25=Massachusetts)	
173-187	Reserved	15	No entry required	
188-189	Reporting Period	2	Enter either "03", "06", "09", "12" (last month of quarter)	
190-275	Reserved	86	No entry required	
<b>Total Rec</b>	cord Length	275	· · ·	

**Record Name: S (Employee)** 

Location Field		Lengt	Length Description and Remarks	
1-1	Record Identifier	1	Enter "S"	
2-10	<b>Employee's Social Security Number</b>	9	Enter Nine Digit SSN	
11-30	Employee's Last Name	20	Left justified	
31-42	Employee's First Name	12	Left justified	
43-43	Employee's Middle Initial	1	Enter Alpha Character	
44-45	State Code	2	Enter "25" (e.g. 25=Massachusetts)	
46-49 "0397" fii	Reporting Quarter and Year rst	4	Enter last month & year (e.g. quarter of 1997)	
50-63	<b>Quarter Total Gross Wages</b>	14	Right justified, zero filled	
64-129	Reserved	66	No entry required	
130-131 calendar was paid.	Number of Weeks Worked	2	Enter number of weeks during the Quarter for which the employe	
132-134	Reserved	3	No entry required	
135-138 "0197"	Date First Employed	4	Enter the month & year (e.g. January of 1997)	
139-142 "0197"	Date of Separation	4	Enter the month & year (e.g. January of 1997).	
143-146	Tax Type Code	4	Enter "UTAX"	
147-275	Reserved	129	No entry required	
Total Re	ecord Length	275		

**Record Name: T (Total)** 

<b>Location Field</b>		Length Description and Remarks	
1-1	Record Identifier	1	Enter "T"
2-8	Total Number of Employees	7	Total S records, Right justified,
zero fille	d		
9-12	Tax Type Code	4	Enter "UTAX"
13-26	Quarter Total Gross Wages for Employer	14	Right justified, zero filled
27-275	Reserved	249	No entry required
Total R	Total Record Length		

Record Name: F (Final)

Location Field		<b>Length Description and Remarks</b>	
1-1	Record Identifier	1	Enter "F"
2-11	<b>Total Number of Employees for transmission</b>	10	Right justified, zero filled
12-21	<b>Total Number of Employers for transmission</b>	10	Right justified, zero filled
22-25	Tax Type Code	4	Enter "UTAX"
26-40	<b>Quarterly Total Gross Wages</b>	15	Right justified, zero filled
41-275	Reserved	235	No entry required
Total R	ecord Length	275	